

PATENT
MAIL STOP ISSUE FEE
0510-1135

IN THE U.S. PATENT AND TRADEMARK OFFICE

In re application of	Allowed July 2, 2009
Loris AMATHIEU et al.	Conf. 9920
Application No. 10/576,811	Group 1793
Filed July 21, 2006	Examiner Paul MARCANTONI

DENSE MORTAR BASED ON BINARY ETTRINGITE BINDER, COMPRISING AT
LEAST ONE POLY(ALKYLENE OXIDE) COMB POLYMER AND AT LEAST ONE
STRUCTURING ORGANIC RESIN

REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner for Patents	July 9, 2009
P.O. Box 1450	
Alexandria, VA 22313-1450	

Sir:

Receipt is acknowledged of the Filing Receipt for
Serial No. 10/576,811.

It is requested that a new Filing Receipt be issued on
which the last name of the third-named inventor, Lionel RAYNAUD,
is correctly given as RAYNAUD (not Ray Naud), as shown by the
accompanying originally-filed Application Data Sheet.

Respectfully submitted,

YOUNG & THOMPSON



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Telefax (703) 685-0573

Application Data Sheet

LAP12 Rec'd PCT/PTO 21 APR 2006

Application Information

Application Type:: National Stage
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: DENSE MORTAR BASED ON BINARY
ETTRINGITE BINDER, COMPRISING
AT LEAST ONE POLY(ALKYLENE
OXIDE) COMB POLYMER AND AT
LEAST ONE STRUCTURING ORGANIC
RESIN
Attorney Docket Number:: 0510-1135
Request for Early
Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 5
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: LORIS
Middle Name::
Family Name:: AMATHIEU
Name Suffix::
City of Residence:: SAINT-LAURENT-DE-MURE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 83, AVENUE JEAN MOULIN
Address::
City of Mailing Address:: SAINT-LAURENT-DE-MURE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 69720

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: BRUNO
Middle Name::
Family Name:: TOUZO
Name Suffix::
City of Residence:: LYON
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 35, RUE DU DOCTEUR BONHOMME
Address::
City of Mailing Address:: LYON
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 69008

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: LIONEL
Middle Name::
Family Name:: RAYNAUD
Name Suffix::
City of Residence:: CORBELIN
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing HAMEAU LE MALLEIN
Address::
City of Mailing Address:: CORBELIN
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 38630

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: DINA
Middle Name::
Family Name:: GAUTHIER
Name Suffix::
City of Residence:: NIEVROZ
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 4, LOTISSEMENT LES BONNES
Address::
City of Mailing Address:: NIEVROZ
State or Province of Mailing Address::

Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 01120

Correspondence Information

Correspondence Customer 00466
Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2004/050529	10/22/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	03 50728	10/23/03	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::